

**CLAIMS ONLY**

**Application Number**

10/040524

**Filing Date**

**Applicant(s)**

82-27-07

\* May be used for additional claims or amendments.

02-27-07

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments						
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	
1							51						
2							52						
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43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
Total Indep:			2				Total Indep:						
Total Depend:			16				Total Depend:						
Total Claims:			18				Total Claims:						